

24 / 48 HOUR NOTICE OF INDEPENDENT EXPENDITURE, on :

09/16/2008 20 : 41

430 South Capitol Street, SE

2nd Floor

Washington

DC

20003

FEC ID No. C00000935

☐ 24-Hour Notice ☒ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF 1 / 3

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

FEC IDENTIFICATION NUMBER

C C00000935

Check if ☐ 24-hour notice ☒ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

Great American Media

Date

M M / D D / Y Y Y Y
0 9 / 1 6 / 2 0 0 8

Amount

35400.12

Mailing Address

1010 Wisconsin Ave., NW

Suite 800

City

Washington

State

DC

Zip Code

20007

Purpose of Expenditure

Media Buy

Category/
Type

004

Office Sought: ☒ House

State: CT

☐ Senate

District: 04

☐ PresidentialCheck One: ☒ Support ☐ OpposeDisbursement For: ☐ Primary ☒ General 2008☐ Other (specify) : _____

Transaction ID: SE-850624

Date of Dissemination 9/16/08

Name of Federal Candidate supported or Opposed by expenditure:

Jim Himes

Calendar Year-To-Date Per Election

164383.62

for Office Sought

Full Name (Last, First, Middle, Initial) of Payee

Great American Media

Date

M M / D D / Y Y Y Y
0 9 / 1 6 / 2 0 0 8

Amount

35400.12

Mailing Address

1010 Wisconsin Ave., NW

Suite 800

City

Washington

State

DC

Zip Code

20007

Purpose of Expenditure

Media Buy

Category/
Type

004

Office Sought: ☒ House

State: CT

☐ Senate

District: 04

☐ PresidentialCheck One: ☐ Support ☒ OpposeDisbursement For: ☐ Primary ☒ General 2008☐ Other (specify) : _____

Transaction ID: SE-850625

Date of Dissemination 9/16/08

Calendar Year-To-Date Per Election

164383.62

for Office Sought

(a) SUBTOTAL of Itemized Independent Expenditures

70800.24

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Brian L. Wolff

Signature

M M / D D / Y Y Y Y
0 9 / 1 6 / 2 0 0 8

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

FEC IDENTIFICATION NUMBER

C C00000935

Check if ☐ 24-hour notice ☒ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

Struble Eichenbaum Communications

Date

M M / D D / Y Y Y Y
0 9 / 1 6 / 2 0 0 8

Amount

2047.27

Mailing Address

700 Seventh Street, SE

City

Washington

State

DC

Zip Code

20003

Purpose of Expenditure

Media Production

Category/
Type

004

Office Sought: ☒ House

State: CT

☐ Senate

District: 04

☐ PresidentialCheck One: ☒ Support ☐ OpposeDisbursement For: ☐ Primary ☒ General 2008☐ Other (specify) : _____

Transaction ID: SE-850708

Date of Dissemination 9/16/08

Calendar Year-To-Date Per Election

164383.62

for Office Sought

Full Name (Last, First, Middle, Initial) of Payee

Struble Eichenbaum Communications

Date

M M / D D / Y Y Y Y
0 9 / 1 6 / 2 0 0 8

Amount

2047.27

Mailing Address

700 Seventh Street, SE

City

Washington

State

DC

Zip Code

20003

Purpose of Expenditure

Media Production

Category/
Type

004

Office Sought: ☒ House

State: CT

☐ Senate

District: 04

☐ PresidentialCheck One: ☐ Support ☒ OpposeDisbursement For: ☐ Primary ☒ General 2008☐ Other (specify) : _____

Transaction ID: SE-850709

Date of Dissemination 9/16/08

Calendar Year-To-Date Per Election

164383.62

for Office Sought

(a) SUBTOTAL of Itemized Independent Expenditures

4094.54

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures

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Brian L. Wolff

Signature

M M / D D / Y Y Y Y
0 9 / 1 6 / 2 0 0 8

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ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF 3 / 3

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

FEC IDENTIFICATION NUMBER

C C00000935

Check if ☐ 24-hour notice ☒ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

Mack Crounse Group, LLC

Date

M M / D D / Y Y Y Y
0 9 / 1 6 / 2 0 0 8

Amount

15292.78

Mailing Address
4900 Seminary Road
Suite 1020City State Zip Code
Alexandria VA 22311Purpose of Expenditure
Mail ServicesCategory/
Type 006Office Sought: ☒ House State: CT
☐ Senate District: 04
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
Jim HimesDisbursement For: ☐ Primary ☒ General 2008☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 164383.62

Transaction ID: SE-850720

Date of Dissemination 9/16/08

Full Name (Last, First, Middle, Initial) of Payee

Mack Crounse Group, LLC

Date

M M / D D / Y Y Y Y
0 9 / 1 6 / 2 0 0 8

Amount

15292.78

Mailing Address
4900 Seminary Road
Suite 1020City State Zip Code
Alexandria VA 22311Purpose of Expenditure
Mail ServicesCategory/
Type 006Office Sought: ☒ House State: CT
☐ Senate District: 04
☐ PresidentialCheck One: ☐ Support ☒ OpposeName of Federal Candidate supported or Opposed by expenditure:
Christopher ShaysDisbursement For: ☐ Primary ☒ General 2008☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 164383.62

Transaction ID: SE-850721

Date of Dissemination 9/16/08

(a) SUBTOTAL of Itemized Independent Expenditures

30585.56

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures

105480.34

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Brian L. Wolff

Signature

M M / D D / Y Y Y Y
0 9 / 1 6 / 2 0 0 8